

Personnel Data Form

Today's date: _____ Is this a renewal badge? _____

Your Last Name: _____ Your First Name: _____

Middle Name: _____ Jr. or Sr.? _____ Initials: _____ Nickname: _____

Male or Female: _____

What Organization (University, Lab, Company, Etc.) are you with? _____

Address of Organization: _____

Are you a student at a college or university: _____ If Yes, where? _____

Are you a Post-Doc? _____ Work Location at SRS: _____

Work Phone: _____ E-mail: _____

Date of GET Training (if you've had it): _____ Are you a US Citizen? _____

When are you coming to pick up the badge? _____

What project are you working on? _____

Are you the Principal Investigator: _____ If not the PI, who is? _____

Description of work vehicle (make, model, body style, color, plate#, etc.) _____

"Privacy Act Notice: The information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). The following information requested in this form is required by the USDA Forest Service, Savannah River to comply with Remote Worker Tracking and Emergency Notification while working on the Savannah River Site, and to complete Department of Energy badge request form OSR-253 or OSR-302 for the purpose of processing and approving a Site security badge that will allow access to the Savannah River Site. Information you provide in response to this request will be treated as confidential, and retained in accordance with the Privacy Act of 1974. This information will be used for the stated purpose of determining your background and identity, contacting you outside normal working hours, and ensuring compliance with security procedures related to the protection of the badge when not working on-Site. Information thus retained may be available to agency personnel or their representatives with a "need-to-know" as part of their official duties and other government officials for routine use. Failure to provide the requested information will result in no further processing of your application for a Site security badge to access the Savannah River Site. You must insure that this information is received by your Forest Service liaison either by telephone, E-mail, confidential fax, or postal mail.

Social Security #: _____ Date of Birth: _____

Local (evening) Phone: _____ Permanent or Home Phone: _____

Permanent or Home Mailing Address: _____

It is your responsibility to schedule and receive both a safety orientation and General Employee Training (GET) if you will be on the site for more than 10 days. Failure to do so may result in the confiscation of your badge and the denial of your access to the site.

It is your responsibility to insure that this information is updated and accurate for the duration of your work at SRS.

JB 9/16/2003